

DEC 14 2005

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Fax No. 571-273-8300

Phone No.

**FROM: Cindy Lukas\_ (Typed or printed name of person signing Certificate)**

Fax No. 513-622-3300

Phone No. 513-622-1692

Application No.: 10/630,502

Inventor(s): Davenport, et al.

Filed: July 30, 2003

Docket No.: P138

Confirmation No.: 7908

**FACSIMILE TRANSMITTAL SHEET AND**  
**CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8**

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Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

- 1) Amendment After 1<sup>st</sup> Office Action (8 pgs.)
- 2) Fee Transmittal (1 pg.)
- 3) Supplemental Information Disclosure Statement (2 pgs.)
- 4) PTO-SB08 (1 pg.)
- 5) Foreign Reference (17 pgs.)

Number of Pages Including this Page: 30

**Comments:**

**\*\*Note:** Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

<b>FEE TRANSMITTAL</b> <b>for FY 2005</b> Patent fees are subject to annual revision. Effective December 8, 2004	<b>Complete if Known</b> <b>RECEIVED</b> <b>CENTRAL FAX CENTER</b>	
	Application Number	10/630,502
	Confirmation Number	7908 DEC 14 2005
	Filing Date	July 30, 2003
	First Named Inventor	Gary Mitchell Davenport
	Examiner Name	Dameron Levest Jones
	Art Unit	1618
TOTAL AMOUNT OF PAYMENT (\$)		180 Attorney Docket No. P138

METHOD OF PAYMENT	FEE CALCULATION (continued)																																													
1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company	<b>5. ADDITIONAL FEES</b> <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee</th> <th>Paid</th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1<sup>st</sup> month</td> <td>(\$120)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2<sup>nd</sup> month</td> <td>(\$450)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3<sup>rd</sup> month</td> <td>(\$1,020)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4<sup>th</sup> month</td> <td>(\$1,590)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5<sup>th</sup> month</td> <td>(\$2,160)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180)</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other:</td> <td></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	Fee Description	Fee	Paid	Extension for reply within 1 <sup>st</sup> month	(\$120)	<input type="checkbox"/>	Extension for reply within 2 <sup>nd</sup> month	(\$450)	<input type="checkbox"/>	Extension for reply within 3 <sup>rd</sup> month	(\$1,020)	<input type="checkbox"/>	Extension for reply within 4 <sup>th</sup> month	(\$1,590)	<input type="checkbox"/>	Extension for reply within 5 <sup>th</sup> month	(\$2,160)	<input type="checkbox"/>	Information Disclosure Statement fee	(\$180)	<input checked="" type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130)	<input type="checkbox"/>	37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet	(\$50)	<input type="checkbox"/>	Non-English specification	(\$130)	<input type="checkbox"/>	Notice of Appeal	(\$500)	<input type="checkbox"/>	Filing a brief in support of an appeal	(\$500)	<input type="checkbox"/>	Request for oral hearing	(\$1,000)	<input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370)	<input type="checkbox"/>	Other:		<input type="checkbox"/>
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<b>3. APPLICATION SIZE FEE:</b> Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$) <input type="checkbox"/>																																														
<b>4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</b> <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below <b>Fee Description</b> Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$) <input type="checkbox"/>		Extra Claims	Fee from Below	Fee Paid	Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>	SUBTOTAL (5) (\$) <input type="checkbox"/> 180																													
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Cynthia L. Clay	Telephone	(513) 622-0291
Signature	<i>Cynthia L. Clay</i>	Date	12-14-05
Registration No.	54,930		

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comment on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT FORGET TO TRANSMITTED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.